

HONORABLE LAURA RICHARD COUNTY CLERK FORT BEND COUNTY, TEXAS

CRIMINAL HISTORY RECORDS REQUEST FORM

Request Forms E-Filed should be submitted as a separate document

(Confidential – This document contains sensitive data)

Cause No.:	Guardianship of:		Court No:
Printed Name of Appli	cant:		
Last	First		Middle
Date of Birth:	Last 4 SSN#:	Driver's License #:	:
Home Phone:		Cell Phone:	
Other Names You Hav	e Used (Also Known As / Alias)):	
Current Physical Addr	ess:		
 Street	Ci	ty State	re Zip
records are required for history reveals a crimina guardian. Not later than clerk a copy of the perso 30 th day before the date of the Departmen	persons proposed to serve as all conviction or other relevant in the 10 th day before the date of on's criminal history records info	guardians of an incapacitate nformation, you may be disq the hearing to appoint a guar	as Estates Code, criminal history ed adult or minor. If the criminal qualified from serving as proposed rdian, a person may submit to the erson obtained not earlier than the
jurisdiction of the proce information is privileged may not be released or	eding for the appointment of a l and confidential and is for excl	guardian. I further understandusive use of the court. The court.	a for the use of the court having and that the criminal history record riminal history record information art order or consent of the person
Certification: I hereby to the best of my knowled	•	e Criminal History Records I	Request Form are true and correct
Signature	Da	<u> </u>	